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CONFIRMATION NO. 9317

<b>SERIAL NUMBER</b> 10/552,403	<b>FILING OR 371(c) DATE</b> 10/07/2005 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2829	<b>ATTORNEY DOCKET NO.</b> KOL.198.WUS	
<b>APPLICANTS</b> Tapio Koivukangas, Oulu, FINLAND; Veikko Loukusa, Oulu, FINLAND; <b>** CONTINUING DATA *****</b> <i>E. Z. K.</i> This application is a 371 of PCT/FI04/00215 04/07/2004 <b>** FOREIGN APPLICATIONS *****</b> <i>E. Z. K.</i> EUROPEAN PATENT OFFICE (EPO) 03100979.8 04/11/2003 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 09/27/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>E. Z. K.</i> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Hollingsworth & Funk 8009 34th Avenue South Suite 125 Minneapolis, MN55425					
<b>TITLE</b> Method and arrangement of testing device in mobile station					
<b>FILING FEE RECEIVED</b> 900	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		